



SERENITY LANE

Alcohol & Drug Treatment Services



Outpatient Handbook

SERENITY LANE

A not-for-profit treatment center for alcohol and other drug dependencies.

Outpatient Treatment is offered at the following locations:

Eugene - 4211 West 11th Ave, Eugene, Oregon 97402 (541) 485-1577

Portland - 10920 S.W. Barbur Blvd., Portland, Oregon 97219 (503) 244-4500

Portland-East - 12662 S.E. Stark, Bldg A., Portland, OR 97233 (503) 546-7677

Salem - 960 Liberty St. SE., Suite #120, Salem, Oregon 97302 (503) 588-2804

Albany - 1050 Price Rd S.E, Albany, Oregon 97322 (541) 928-9681

Bend - 601 N.W. Harmon Blvd., Bend, Oregon 97701 (541) 383-0844

Roseburg - 2575 N.W. Kline Street, Roseburg, OR 97471 (541) 673-3504

Vancouver - 4305 NE Thurston Way, Suite E, Vancouver, WA (360) 213-1216

Inpatient Hospital and Residential Treatment Center

COBURG CAMPUS - 1 Serenity Lane (P.O. Box 8549) Coburg, Oregon 97408

TELEPHONE: 541-687-1110, TOLL-FREE: (800)-543-9905, FAX: (541)-683-9061

All calls are kept strictly confidential. Personal assistance is always available by phone, 24/7 if needed.

Crisis Hotline Numbers

911

Alcohol & Drug Hotlines

Alcohol and Drug Help Line: (800) 923-4357 (Oregon)

Washington Recovery Health: (866) 789-1511

Mental Health Crisis/Suicide Hotline

Compass Behavioral Health: 24/7 coverage, (541)-440-3532

Mental Health Crisis/Suicide: (800) 273-8255 (National)

White Bird, Lane County: (541) 687-4000 / (800) 422-7558

Gambling Hotline

Problem Gambling: (877) 695-4648 (Oregon)

Washington Gambling: (800) 547-6133

Domestic Violence/Sexual Abuse Hotline

Domestic Violence Hotline: (800) 799-7233 (National)



Outpatient Treatment



Welcome from the Staff

Recovery is one day at a time. It involves a personal daily recovery program which is developed by you and your treatment team. Our staff is here to assist you in your recovery program. Please do not hesitate to call us if you have any questions.

Overview

Serenity Lane's Outpatient program provides a treatment experience based on the individual's emerging needs. Patients attend a lecture/film series and group therapy during the week. Individual sessions are scheduled between you and your counselor. Both day and evening groups are available. Patients transition to Recovery Support following the Outpatient Program.

The first phase of outpatient treatment is a total of 30 sessions of intensive group work and education. Treatment sessions are held three times per week, three hours per session.

The second phase of treatment is called Recovery Support. This 12-24 month program provides a weekly 1-1/2 hour support group. In Recovery Support you learn to cope with the ups and downs of early recovery.

Assessment

What is an assessment? Serenity Lane's assessment gathers specific information for determining if criteria for a substance use disorder diagnosis exists, the level of dysfunction in life functioning, and evidence reflecting other mental health issues. Based on DSM-5 (Diagnostic and Statistical Manual of Mental Disorders) and ASAM criteria, we are able to determine diagnosis and appropriate level of care for services provided. If providing treatment, we are able to use this information to develop an individualized service plan to address the issues identified from the assessment.

An assessment is carried out whenever a patient enters Serenity Lane, between levels of care, upon emergence of episodic health problems, upon changes in health status, or upon request, etc

Orientation

You will be oriented to the Outpatient Program before you begin treatment. You will receive 12-Step literature and additional material from your counselor.

Educational Series

The educational series examines a wide range of topics including: history of substance use disorder, physiological and psychological effects of alcohol and other drugs, addiction as a disease, understanding relapse, development of relapse prevention plan, recovery coping tools, the effects of addiction on the family, stress reduction, anger, denial, and wellness/nutrition. Patients are expected to attend all lectures except when specifically excused by staff. We recommend that you take notes during lectures for later reference.

Group Therapy

Group therapy is a time when you will explore dealing with problems, feelings, changes, and conflicts which arise during treatment. This is a most significant part of treatment. There are rules which regulate group behavior in order to increase positive results for everyone in group. The rules are also posted in each group room.

Family Involvement

Family members and significant others are urged to be involved in treatment. It is important for individual family members and significant others to each begin *their own recovery* process. Family members are encouraged to attend the family program offered one night per week during IOP treatment.

Outpatient Treatment



On Family Night, the patient lecture series offers topics oriented toward relationship and addiction interests. Family members are encouraged to attend this lecture with the patients and afterward will participate in their own group, separate from the patient. Family members of patients in the morning program may participate in the evening program.

Individual Counseling

Throughout your treatment, you will meet individually with your counselor in addition to attending lecture and group therapy. In these one-hour individual sessions, you will share with your counselor your personal history, emotional concerns, specifics about your addiction and review your progress in treatment. Please make an appointment with your counselor at the beginning of your first week of treatment.

First Step

Each patient will complete and present their First Step to the group during their treatment. The First Step process is an initial review of your history with substance use and their affect on you and others. It is a critical element in fully recognizing your disease process. Again, you are encouraged to ask for help as you begin writing your First Step.

Treatment Planning

Treatment planning is at the heart of your program here. An Individualized Service Plan will be developed in collaboration with you and your counselor. The Individualized Service Plan is meant to clearly identify those Problems, Goals, Objectives and Activities that will assist you in achieving recovery. The Individualized Service Plan is also a tool to assess how you are doing at any given time in treatment, and to help focus your efforts. The Individualized Service Plan will be revised by you and your counselor as you complete tasks, and also may be expanded as new problems arise.

Patient Monitoring

With your permission, Serenity Lane can send regular reports to employers, probation officers, professional boards, human resource administrators, the judicial system, Department of Human Services, and others when you need your progress and attendance to be reported.

Sober Support

Patients are encouraged to attend a minimum of two community support meetings per week prior to advancement to Recovery Support. Specific meetings may be suggested by the group counselor.

Recovery Support

Recovery Support is the continuation of a planned recovery process for substance use disorder. Upon successful completion of IOP, each patient advances to Recovery Support, at which time they are assigned to a Recovery Support group. Patients attend 1.5 hours of group therapy per week for an amount of time agreed upon by you and your counselor.

Alumni Activities

Patients, former patients, and their families are encouraged to participate in Serenity Lane's Alumni Program. As a valued Serenity Lane Alum, you will receive email newsletters inviting you and your family to attend social events, lectures, service opportunities and training seminars sponsored by Serenity Lane. For more information, find us online at: serenitylane.org or call the Alumni Coordinator Stephanie Edwards at (541) 687-1110 and be sure to provide us with your email address for activities/events.

DUII Services

Serenity Lane provides DUII services and offers treatment groups at a wide variety of times to fit your schedule. Talk to your counselor for more information.



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* **Voter Registration:**

Would you like to register to vote? If so, you can visit vote.gov or ask a fill out and mail a Voter Registration Form. You can also vote in-person at your local county elections office. The deadline to register is 21 days before Election Day. If you are interested, or have any questions, please ask a Serenity Lane staff member for assistance.

* **Mental Health Declaration:**

You can plan now for a time when you may be unable to make your own mental health treatment decisions. There is a form available that you can fill out and sign now to protect yourself when you may be in a crisis and unable to make your own treatment decisions. This form is called a Declaration for Mental Health Treatment. If you are interested, or have any questions, please ask to meet with Serenity Lane's Quality Assurance Manager.

* **Advance Directives:**

Advance Directives are legal documents that allow you to spell out your decisions about end-of-life care ahead of time. They give you a way to tell your wishes to family, friends, and health care professionals and to avoid confusion later on. You can include instructions on medical care such as: the use of dialysis and breathing machines, if you want to be resuscitated if your breathing or heartbeat stops, tube feeding, organ or tissue donation. If you are interested, or have any questions, please ask to meet with Serenity Lane's Quality Assurance Manager.

* **Your input matters!**

Our patients are our number one resource for quality improvement efforts. You can provide input directly to your counselor or in our patient surveys. There are additional opportunities to provide input in residential. Ask your counselor or a staff member for more information.

* **Care Coordination:**

Serenity Lane organizes your patient care activities by sharing information amongst staff who are involved in your care, from admission throughout your treatment program, to achieve safe and effective care. In Hospital Unit and Residential programming, the Medical Director and Clinical Director meet daily with clinical, mental health and nursing staff to discuss ways to provide you with optimal care coordination. You are welcome to discuss this coordination with your primary counselor. In outpatient programs, care coordination is the responsibility of the program manager and your primary counselor.

* **Non-Violent Practices:**

It is Serenity Lane's policy to not use restraint-and-seclusion in its environment. There are times when patients may show signs of fear, anger, or pain, which may lead to aggression or agitation. Staff members are trained to recognize and respond to these signs through de-escalation, changes to the physical environmental, implementation of meaningful and engaging activities, redirection, active and empathetic listening and so on.

In the extremely rare event these interventions are not successful and there is imminent danger of serious harm to anyone, seclusion or restraint may be briefly used to ensure safety. Seclusion and restraint are never considered treatment interventions; they are always considered actions of last resort.



Our Mission

To transform lives through the treatment of addiction

Our Values

Integrity, Respect, Compassion, Quality

Our Philosophy

Recovery from addiction is possible

Our Commitment

Provide excellent patient care

Be sensitive to the needs of our patients

Affirm the dignity and worth of our patients and their families

Foster a spirit of partnership with the communities we serve

Coordinate patient care with other healthcare providers

Empower patients and their families to grow in their recovery



Confidentiality

You have the right to confidential treatment. This means that we will not notify or release information to anyone outside this facility without your written permission.

Any information we give to the family, the employer, or to other agencies has to be permitted by you. If you give us Authorization to use or disclose health information about you, you may revoke that Authorization, in writing, at any time.

If you revoke your Authorization, we will no longer use or disclose information about you for the reasons covered by your written Authorization, but we cannot take back any uses or disclosures already made with your permission. Serenity Lane reserves the right to contact the individual(s) or agencies that the release has been revoked.

We work as a team to improve your treatment. This involves exchanging information and ideas. These disclosures are limited to staff and continuing care counselors professionally associated with our agency.

Serenity Lane follows state and federal regulations for patient confidentiality. You should be aware of the following situations regarding your confidentiality:

1. If a Court Subpoena is issued. If you are involved in a court trial and the opposing attorney wishes to subpoena your records, they can do so. It is our policy not to surrender your chart until and unless the attorney petitions the judge for a court order. We must comply with court orders, or we would be subject to contempt of court proceedings. Even in these circumstances the judge must not reveal the contents of your record to anyone, unless it has direct bearing on the trial.

For example, if you are involved in a child custody hearing and your spouse has your record subpoenaed to prove that you are an alcoholic or drug dependent, the judge would first have to decide whether it was relevant to the case before allowing the contents of the chart to be brought up at the trial.

2. The state of Oregon requires disclosure to Services to Children and Families of any mistreatment of children to the point where it is determined to be “child abuse.”

3. If, as a patient, you are deemed to be dangerous to yourself or others. If for some reason the staff believe that you are threatening to harm yourself or others and/or are about to take your life or others, the administrator would override confidentiality.

While regulations may be unsettling, please be assured that Serenity Lane is your advocate.

We do not want to use information in a harmful way. We will go out of our way to protect all information about you to the fullest extent allowed by law.

If you have any questions about these regulations, or about your total right to confidentiality, please contact the counseling staff immediately.

Serenity Lane - Patient Rights based on OAR 309-019-0115

Rights and Responsibilities

POLICY:

Serenity Lane treats patients with dignity and respect. Patients are informed that their rights include at a minimum, confidentiality of information, privacy, and freedom from abuse, exploitation, retaliation, humiliation, and neglect. Patients will never receive any physical, psychological, or other forms of adverse action or discipline. Patients will never be disciplined by staff members, or students, or other patients, or any other stakeholders. Patients will never have shelter, meals, clothing or aids to physical functioning withheld. Patients will not be required to titrate off medications prescribed for the treatment of opioid dependence as a condition of treatment.

PURPOSE:

To ensure that patients are treated with respect and dignity by encouraging them to participate in all aspects of their care, as appropriate to each patient's unique characteristics; and, to comply with state, federal and other regulatory bodies that require a mechanism to inform patients of their rights.

PROCEDURE:

I. Patient Rights for Outpatient per OAR 309-019-0115

1. In addition to all applicable statutory and constitutional rights, every individual receiving Serenity Lane services has the right to:
 - a. Choose from services and supports that are consistent with the assessment and service plan, culturally competent, provided in the most integrated setting in the community and under conditions that are least restrictive to the individual's liberty, that are least intrusive to the individual, and that provide for the greatest degree of independence;
 - b. Be treated with dignity and respect;
 - c. Participate in the development of a written service plan, receive services consistent with that plan and participate in periodic review and reassessment of service and support needs, assist in the development of the plan, and receive a copy of the written service plan;
 - d. Have all services explained, including expected outcomes and possible risks;
 - e. Confidentiality and the right to consent to disclosure in accordance with ORS 107.154, 179.505, 179.507, 192.515, 192.507, 42 CFR Part 2 and 45 CFR Part 205.50;
 - f. Give informed consent in writing prior to the start of services, except in a medical emergency or as otherwise permitted by law. Minor children may give informed consent to services in the following circumstances:
 - i. Under age 18 and lawfully married;
 - ii. Age 16 or older and legally emancipated by the court; or
 - iii. Age 14 or older for outpatient service solely. For purposes of informed consent, outpatient service does not include service provided in residential programs or in day or partial hospitalization programs. Note: Serenity Lane does not provide services to patients under 18 years of age.
 - g. Inspect their service record in accordance with ORS 179.505;
 - h. Refuse participation in experimentation;
 - i. Receive medication specific to the individual's diagnosed clinical needs, including medications used to treat opioid dependence;
 - j. Receive prior notice of transfer, unless the circumstances necessitating transfer pose a threat to health and safety;
 - k. Be free from abuse or neglect and to report any incident of abuse or neglect without being subject to retaliation;

Serenity Lane - Patient Rights based on OAR 309-019-0115 *(continued)*

Rights and Responsibilities

- l. Have religious freedom;
 - m. Be free from seclusion or restraint;
 - n. Be informed at the start of services and periodically thereafter of the rights guaranteed by this rule;
 - o. Be informed of the policies and procedures, service agreements and fees applicable to the services provided, and to have a custodial parent, guardian, or representative assist with understanding any information presented;
 - p. Have family and guardian involvement in service planning and delivery;
 - q. Have an opportunity to make a declaration for mental health treatment, when legally an adult;
 - r. File grievances, including appealing decisions resulting from the grievance;
 - s. Exercise all rights set forth in ORS 109.610 through 109.697 if the individual is a child, as defined by these rules. Note: Serenity Lane does not provide services to patients under 18 years of age.
 - t. Exercise all rights set forth in ORS 426.385 if the individual is committed to the Authority; and
 - u. Exercise all rights described in this rule without any form of reprisal or punishment.
2. Serenity Lane shall give to the individual and, if appropriate, the guardian a document that describes the individual's right as follows:
- a. Information given to the individual shall be in written form or, upon request, in an alternative format or language appropriate to the individual's need;
 - b. The rights and how to exercise them shall be explained to the individual, and if applicable the guardian; and
 - c. Individual rights shall be posted in writing in the reception area of each Serenity Lane location.

Complaints & Grievances

POLICY:

Patients, family members and significant others have the right to express concerns about their care and service provided by Serenity Lane. The action of an informal or formal complaint or grievance will not result in any retaliation or barriers to services at Serenity Lane. The President/CEO, or designee, is responsible for the oversight of the complaint and grievance process throughout the Serenity Lane system. All parties involved in a complaint or grievance have the right to be fairly heard, to be treated with dignity and respect as well as the responsibility to be honest, forthright and to work toward a reasonable resolution of the complaint or grievance.

PURPOSE:

To provide a mechanism for patients, family members and significant others to give input into the care and services provided at Serenity Lane and to ensure that administration is timely, accessible and responsive to the consumer's concerns as required by Serenity Lane's policies and applicable laws.

PROCEDURE:

I. Grievances and Appeals per OAR 309-019-0215

- A. Any patient or parent or guardian receiving Serenity Lane services may file a grievance with Serenity Lane, the patient's coordinated care plan, or the Addiction and Mental Health Division of Oregon.
- B. Serenity Lane's grievance process shall:
 - a. Notify each patient or guardian of the grievance procedures by reviewing a written copy of the policy upon entry during the Admissions process;
 - b. Assist patients and parents or guardians to understand and complete the grievance process and notify them of the results and basis for the decision;
 - c. Encourage and facilitate resolution of the grievance at the lowest possible level;
 - d. Complete an investigation of any grievance within 30 calendar days;
 - e. Implement a procedure for accepting, processing, and responding to grievances including specific timelines for each as outlined below;
 - f. Designate a program staff patient to receive and process the grievance as outlined below;
 - g. Document any action taken on a substantiated grievance within a timely manner; and
 - h. Document receipt, investigation, and action taken in response to the grievance.
- C. A Grievance Process Notice is posted in a reception at every Serenity Lane location stating the telephone numbers of:
 - a. The Addiction and Mental Health Division of Oregon: 1-503-945-5772
 - b. Disability Rights of Oregon: 1-503-243-2081
 - c. Any applicable coordinated care organization:
 - i. HealthShare: 888-519-3845
 - ii. IHN: 800-832-4580
 - iii. Trillium: 877-367-1332
 - iv. PacificSource Community Solutions: 800 - 431-4135
 - v. Umpqua Health Alliance: 541-229-4842
 - d. The Governor's Advocacy Office: 1-800-442-4238
- D. In circumstances where the matter of the grievance is likely to cause harm to the patient before the grievance procedures are completed, the patient or guardian of the patient may request an expedited review. Serenity Lane's President/CEO, or designee, shall review and respond in writing to the grievance within 48 hours of receipt of the grievance. The written response shall include information about the appeal process.
- E. A grievant, witness, or staff member of a provider may not be subject to retaliation by a provider for making a report or being interviewed about a grievance or being a witness. Retaliation may include but is not limited to dismissal or harassment, reduction in services, wages, or benefits, or basing service or a performance review on the action.

Complaints & Grievances

- F. The grievant is immune from any civil or criminal liability with respect to the making or content of a grievance made in good faith.
- G. Patients and their legal guardians may appeal entry, transfer, and grievance decisions as follows:
 - a. If the patient or guardian is not satisfied with the decision, the patient or guardian may file an appeal in writing within ten working days of the date of the program administrator's response to the grievance or notification of denial for services. The appeal shall be submitted to the Division;
 - b. If requested, program staff shall be available to assist the patient;
 - c. The Division shall provide a written response within ten working days of the receipt of the appeal; and
 - d. If the patient or guardian is not satisfied with the appeal decision, they may file a second appeal in writing within ten working days of the date of the written response to the Division Director.

II. Written Grievance Procedure

- A. If the patient is not satisfied with the complaint resolution, he or she may submit a written grievance to the program manager, President/CEO, or designee. Serenity Lane has an established process for prompt resolution of consumer grievances.
- B. The President/CEO, or designee, has the final decision-making authority to resolve a grievance and has the responsibility to assure consumer complaints and grievances are addressed and resolved within 30 days of receipt. If a supervisor or Program Manager receives a patient consumer or non-patient consumer complaint, they will intercede as appropriate and report issues to the President/CEO, or designee, based on the severity of the concern. Non-patient consumers may express their problems or concerns either verbally or in writing to any supervisor or administrative personnel, at any time. Complaints regarding privacy or security will be reported to Serenity Lane's Privacy or Security Officer for investigation and mitigation.
- C. Grievance Forms are available at all program sites, and are included in the Patient Handbook. If a patient completes a written grievance, a record of the grievance and response will be maintained in the Quality Assurance Department.
- D. The President/CEO, or designee, will maintain a record of complaints and grievances which will be reviewed annually to determine trends, identify opportunities for improvement and make recommendations as appropriate.
- E. Trends and opportunities for improvement will be reported annually to the Quality Improvement Committee (QIC).

Serenity Lane Grievance Form

Serenity Lane values our customer's input. We use this as an opportunity to review and improve the quality of our care and services. Please complete this form or attach a copy of your written, signed and dated concern, and submit it to the program manager or program receptionist. A Serenity Lane representative will attempt to review your concern within 5 (five) working days.

After we review your concern, we will complete the RESPONSE section. You will receive a copy with any recommendations or actions that were taken.

NAME _____
Please Print

DATE _____

PATIENT, PLEASE DESCRIBE YOUR CONCERN:

Patient's Signature

SERENITY LANE RESPONSE (The Manager, or CEO's designee, may write response or forward the patient's concern to the CEO for review and recommendation, as appropriate.)

Signature of Program Manager or Designee

Date